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Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) 06/23/2004 7590 MACRI VINCENT J. MARCT Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below. **5 TIMBER BROOK LANE** DURHAM, NH 03824 MACY (Depositor's name) (Signature 2004 FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE 6465 . 10/603,331 06/26/2003 Vincent J. Macri title of invention: method and apparatus for tutorial, self and assisted instruction directed to simulated preparation, TRAINING AND COMPETITIVE PLAY AND ENTERTAINMENT **PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE SMALL ENTITY ISSUE FEE APPLN, TYPE 09/23/2004 \$300 YES \$665 \$965 penprovisional EXAMINER ART UNIT CLASS-SUBCLASS CHENG, JOE H 3713 434-247000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer attorneys or agents. If no name is listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. Inclusion of assignce data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) W Melone INCENT J. MACYI Timber Brook Durham NH03824 hane Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual Corporation or other private group entity 4b. Payment of Fee(s): ia. The following fee(s) are enclosed: Sissue Fee A check in the amount of the fee(s) is enclosed. Publication Fee ☐ Payment by credit card. 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